FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D
NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB Number:	3235-0076
Expires:	April 30, 2008
Estimated average	
	16.00
	

OMB APPROVAL

hours pe	r form		16.00
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Prefix		· · ·	Serial
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	DATE R	ECEIVED	
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Name of Offering (check	k if this is an amendment and na	rme has changed, and in	dicate change.)	/ >	
Issuance of shares of K2 Over	seas Long Short Fund I, Ltd.				
Filing Under (Check box(es) that	t apply):	☐ Rule 505	⊠ Rule 506	☐ Section 4(6) No local	ŲĽOE
Type of Filing: New F	Filing	ent		/3/	
	A. BA	SIC IDENTIFICATI	ON DATA	< 80T 13 111	ul.
1. Enter the information reque	sted about the issuer				/N/
Name of Issuer ☐ check	if this is an amendment and nar	me has changed, and inc	licate change.	No. sana /s	,5)/
K2 Overseas Long Short Fund	II, Ltd.				7
Address of Executive Offices		(Number and Stree	t, City, State, Zip Code	e) Telephone Number	(Including Area Code)
c/o Maples Finance BVI Limite	d, Kingston Chambers, P.O. E	ox 173, Road Town To	rtola BVI		
Address of Principal Offices	- -	(Number and Stree	t, City, State, Zip Code	e) Telephone Number	(Including Area Code)
(if different from Executive Office	es)			PROC	ESSED
Brief Description of Business:	Private investment Compa	ny		<u> </u>	
				OCT 3	1 2006
Type of Business Organization					
A. BASIC IDENTIFICATION DATA Section 4(6) Sect					
business	A. BASIC IDENTIFICATION DATA Sunder (Check box(es) that apply):	VCIAL			
	- · · · - ·	Month	Year		
Actual or Estimated Date of Inco	rporation or Organization:	0 4	0	5 🔲 🛛 Actual	☐ Estimated
Jurisdiction of Incorporation or O	rganization: (Enter two-letter U.	S. Postal Service Abbre	viation for State;		
		CN for Canada; FN for	other foreign jurisdict	ion) F N	<u> </u>

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

		A. BASIC	IDENTIFICATION DAT	ΓΑ	
 Each beneficial ow Each executive offi 	the issuer, if the is mer having the po icer and director o	following: ssuer has been organized w	within the past five years:	of 10% or more of	f a class of equity securities of the issuer; artnership issuers; and
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	Director	☑ Investment Manager
Full Name (Last name first,	if individual): K2	/D&S Management Co., L	L.C.	<u> </u>	
Business or Residence Add	Iress (Number an	d Street, City, State, Zip Co	ode): 300 Atlantic Street, 12	2 th Floor, Stamfor	d, Connecticut 06901
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual): Do	ouglas III, William A.			
Business or Residence Add 300 Atlantic Street, 12 th Flo	ress (Number and	d Street, City, State, Zip Co	ode) c/o K2/D&S Manageme	ent Co., L.L.C.	
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual): Sar	unders. David C.			
Business or Residence Add 300 Atlantic Street, 12 th Flo	ress (Number and oor, Stamford, C	d Street, City, State, Zip Co Connecticut 06901	ode): c/o K2/D&S Managem	ent Co., L.L.C.	
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, i	if individual): Chr	istie, Stephanie			
Business or Residence Addr 300 Atlantic Street, 12 th Fig	ress (Number and	Street, City, State, Zip Co	ode): c/o K2/D&S Managem	ent Co., L.L.C.	
Check Box(es) that Apply:	Promoter	Onnecticut 06901 Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual): Tex	as Treasury Safekeeping	Trust Co.		
Business or Residence Addr	ess (Number and	I Street, City, State, Zip Cor	de): 111 E. 17 th Street., Aus	stin, TX 78711	
Check Box(es) that Apply:	Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	l individual): PFA	Pension			
Business or Residence Addr	ess (Number and	Street, City, State, Zip Coo	de): Sundkrogsgrade 4, 21	00 Copenhagen (DE, Denmark
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual):				
Business or Residence Addre	ess (Number and	Street, City, State, Zip Coc			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual):				
Business or Residence Addre	ess (Number and	Street, City, State, Zip Cod	:(et		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

					В.	INFORM	MATION	ABOUT	OFFER	ING			
1. Ha	s the issue	r sold, or o	does the is	suer inten	d to sell, to Answer a	o non-accr also in App	edited inve pendix, Co	estors in th lumn 2, if t	is offering filing under	? r ULOE.		Yes	⊠ No
2. W	nat is the m	ninimum in	vestment t	hat will be	accepted	from any i	ndividual?		***************************************				000,000* eject to reduction
3. Do	es the offe	ring permi	t joint own	ership of a	single uni	t?		(**************		*************		⊠ Yes	□ No
an off an	ter the info y commissi ering. If a p d/or with a sociated pe	ion or simi person to l state or st	lar remune be listed is ates, list th	eration for an associ	solicitation ated perso the broke	of purcha on or agen r or dealer	sers in cor t of a broke r. If more t	nection w er or deale han five (5	ith sales o er registere 5) persons	f securities d with the to be liste	s in the SEC d are		
	ne (Last na		individual)									
	rgan Secui s or Resid		ess (Numb	er and Str	reet, City, S	State, Zip	Code)	345 Parl	k Avenue,	6 th Floor,	New York	, New York	10154-1002
	f Associate						<u> </u>						
										·			
	n Which Pe heck "All Si												
☐ [AL]	□ [AK]	[AZ]	☐ [AR]	CA]	☐ [CO]	□ [CT]	□ [DE]		[FL]	□ [GA]	□ [HI]	□ [ID]	
	□ [IN]	[IA]	□ (KS)	□ [KY]	[LA]	☐ [ME]	[MD]	☐ [MA]	[IM]	☐ [MN]	☐ [MS]	☐ [MO]	
[MT]	□ (NE)	□ [NV]	□ [NH]	□ [NJ]	[MM]	□ [NY]		□ [ND]				□ [PA]	
☐ [RI]		[SD]		[XT] □	[[עד]	□ [VT]	□ [VA]	□ [WA]	□ [WV]		☐ [WY]	☐ [PR]	
Full Nar	ne (Last na	ıme first, il	individual)	-			· - · · ·				•	
Busines	s or Reside	ence Addr	ess (Numb	er and Str	reet, City, S	State, Zip (Code)						
Name o	f Associate	d Broker	or Dealer									<u> </u>	
	n Which Peneck "All Si												☐ All States
☐ [AL]	□ [AK]	□ [AZ]	☐ [AR]	☐ [CA]	[CO]	CT)	[DE]	□ [DC]	[FL]	□ [GA]	☐ [HI]	[ID]	
	□ [IN]	□ [IA]	☐ [KS]	□ [KY]	□ [LA]	☐ [ME]	[MD]	☐ [MA]	[MI]	☐ [MN]	☐ [MS]	[MO]	
□ [MT]	□ [NE]	□ [NV]	□ [NH]	[ℓN]	□ [NM]	□ [NY]	☐ [NC]	□ [ND]	[OH]	□ (OK)	OR]	□ [PA]	
☐ [RI]	□ [SC]	□ [SD]	□ (TN)	□ [TX]	[ען]	□ [VT]	[VA]	[WA]		[WI]		□ (PR)	
Full Nar	ne (Last na	ıme first, it	individual)									
Busines	s or Reside	ence Addr	ess (Numb	er and Str	eet, City, S	State, Zip (Code)						
Name o	f Associate	d Broker o	or Dealer										
	n Which Pe			_							<u> </u>		☐ All States
(O.					☐ [CO]		_		_	☐ [GA]	[HI]	[ID]	magain of the same and before
	□ [IN]	□ [IA]	☐ [KS]	□ [KY]	□ [LA]	☐ [ME]	[] [MD]	☐ [MA]	[MI]	☐ [MN]	☐ [MS]	☐ [MO]	
[MT]	□ [NE]	□ [NV]	□ [NH]	□ [NJ]	[MM]	□ [NY]	[NC]	□ [ND]	□ [OH]	□ [OK]		□ [PA]	
□ (RI)	☐ {SC}	[CO3]	□ [TN]	□ [XΤ]	[TU]		□ [VA]	□ [WA]	□ [WV]	□ [WI)	□ [WY]	☐ [PR]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

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C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		Aggregate Offering Price		Amount Already Sold
	Debt	. <u>\$</u>		\$	
	Equity	. <u>\$</u>		\$	
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	. \$		\$	
	Partnership Interests	. \$		\$	· · · · · · · · · · · · · · · · · · ·
	Other (Specify) Shares	\$	500,000,000	s	218,867,408
	Total	s	500,000,000	s	218,867,408
	Answer also in Appendix, Column 3, if filing under ULOE			•	2.0,00.,000
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors	·	99	\$	218,867,408
	Non-accredited Investors	·	n/a	<u>\$</u>	n/a
	Total (for filings under Rule 504 only)	·	0	\$	0
	Answer also in Appendix, Column 4, if filing under ULOE				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.				
	Type of Offering		Types of		Dollar Amount
	Rule 505		Security	•	Sold
				<u>\$</u>	n/a
	Regulation A	_		\$	n/a
	Rule 504	_	n/a	\$	n/a_
	Total		n/a	<u>\$</u>	n/a
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees		🗖	\$	
	Printing and Engraving Costs			\$	
	Legal Fees		🖾	\$	32,909
	Accounting Fees		🗆	\$	
	Engineering Fees			\$	
	Sales Commissions (specify finders' fees separately)			\$	0
	Other Expenses (identify)			\$	
	Total		🛛	<u>\$</u>	32,909

and	nter the difference between the aggregate offering pr I total expenses furnished in response to Part C–Que ss proceeds to the issuer."	estion 4.a. This difference is the "	adjusted				499,96	7,091
5 Indi- use esti	icate below the amount of the adjusted gross proceed of for each of the purposes shown. If the amount for mate and check the box to the left of the estimate. T adjusted gross proceeds to the issuer set forth in res	ds to the issuer used or proposed any purpose is not known, furnish The total of the navments listed m	to be					
				Paymen Office Director Affillat	'5, '5 &			ents to hers
	Salaries and fees	•••••		\$	0		\$	0
	Purchase of real estate			\$	0		\$	0
	Purchase, rental or leasing and Installation of ma	achinery and equipment		\$	0		\$	0
	Construction or leasing of plant buildings and fac	ilities		\$	0		\$	0
	Acquisition of other businesses (including the val offering that may be used in exchange for the ass	lue of securities involved in this			<u> </u>		<u>*</u>	
	pursuant to a merger			\$	0		\$	0
	Repayment of indebtedness			<u>\$</u>	0	_ 🗆	\$	0
	Working capital			\$	0		\$ 499,9	967,09
	Other (specify):			\$	0_		\$	0
				\$	0		\$	0
	Column Totals			\$	0	⊠	\$499,9	967,09
						\$ 499,967,091		
	Total payments Listed (column totals added)				\$ 4	99,9	67,091	
	Total payments Listed (column totals added)	D. FEDERAL SIGNATUR	RE					
by the is		D. FEDERAL SIGNATULE and ersigned duly authorized personagraph (b)(2) of Rule 502.	RE on. If this n nission, upo	otice is filed uno	der Rule st of its s	505 the	a following sl	gnature furnished
by the is	Total payments Listed (column totals added) suer has duly caused this notice to be signed by the unites an undertaking by the issuer to furnish to the U.S sauer to any non-accredited investor pursuant to para Print or Type) seas Long Short Fund I, Ltd.	D. FEDERAL SIGNATULE and arrived person agraph (b)(2) of Rule 502.	RE on. If this n nission, upo	otice is filed uno	der Rule st of its s	505, the	a following sl	fumished
by the is Issuer (I Overs Name o	Total payments Listed (column totals added) suer has duly caused this notice to be signed by the unites an undertaking by the issuer to furnish to the U.S ssuer to any non-accredited investor pursuant to para	D. FEDERAL SIGNATULE and ersigned duly authorized personagraph (b)(2) of Rule 502.	RE on. If this n nission, upo	otice is filed uno	der Rule st of its s	505, the	e following sl	fumishe
by the is Issuer (I Overs Name o	Total payments Listed (column totals added) suer has duly caused this notice to be signed by the unites an undertaking by the issuer to furnish to the U.S ssuer to any non-accredited investor pursuant to para Print or Type) seas Long Short Fund I, Ltd. of Signer (Print or Type)	D. FEDERAL SIGNATULE Indersigned duly authorized person agraph (b)(2) of Rule 502. Signature Title of Signer (Print or Type)	RE on. If this n nission, upo	otice is filed uno	der Rule st of its s	505, the	e following sl	fumished

E. STATE SIGNATURE

1. Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions of such rule?

See Appendix, Column 5, for state response.

- The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filled, a notice on Form D
 (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the Issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type) K2 Overseas Long Short Fund I. Ltd.	Signature	Oate October 12, 2006
K2 Overseas Long Short Fund I, Ltd. Name of Signer (Print or Type)	Title of Signer (Print or Type)	000001 12, 0000
Stephanie Christie	Director	

Instruction:

Print the names and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manual not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				APF	PENDIX				
1	7	2	3	5	i				
	Intend to sell to non-accredited investors in State (Part B – Item 1)		Type of security and aggregate offering price offered in state (Part C – Item 1)		Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E – Item 1)				
State	Yes No		Shares of K2 Overseas Long Short Fund I, Ltd.	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK							·		
AZ									
AR									
CA		х	\$500,000,000	1	\$1,000,000	0	\$0		x
со							_		
СТ		х	\$500,000,000	1	\$2,500,000	0	\$0		x
DE									
DC									
FL		х	\$500,000,000	1	\$500,000	0	\$0		х
GA									
н									
D									
L		х	\$500,000,000	1	\$6,000,000	0	\$0		х
IN		х	\$500,000,000	1	\$600,000	0	\$0		х
IA									
KS									
KY									
LA									
ME									
MD									
MA									
Mi		х	\$500,000,000	1	\$7,000,000	0	\$0		x
MN									
MS									
МО									
MT									
NE									
NV									
NH									
NJ		х	\$500,000,000	1	\$1,000,000	0	\$0		х
NM	1								

				AP	PENDIX					
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1	2	2 3 4						5	j	
	Intend to non-ad investors (Part B -	ccredited in State	Type of security and aggregate offering price offered in state (Part C – Item 1)		Type of investor and Amount purchased in State (Part C – Item 2)					
State	Yes	No	Shares of K2 Overseas Long Short Fund I, Ltd.	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
NY		Х	\$500,000,000	9	\$8,805,000	0	\$0		х	
NC		х	\$500,000,000	4	\$2,450,000	0	\$0		х	
ND										
ОН		Х	\$500,000,000	1	\$1,000,000	0	\$0		х	
ОК		-								
OR										
PA										
RI										
sc								ļ		
SD									ļ	
TN									<u> </u>	
TX		X	\$500,000,000	2	\$25,500,000	0	\$0	<u> </u>	X	
UT										
VT									ļ <u></u>	
VA										
WA									ļ	
WV									ļ	
WI							<u> </u>		<u> </u>	
WY										
Non		X	\$500,000,000	76	\$162,087,408	0	\$0	<u> </u>	X	